

MAIL TO: CITY OF TIFFIN

P.O. BOX 518 TIFFIN, OH 44883

INCOME TAX DEPARTMENT PHONE: 419-448-5405 53 EAST MARKET STREET FAX: 419-448-5406 WEB: www.tiffinohio.gov

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## INDIVIDUAL DECLARATION OF EXEMPTION

SOCIAL SECURITY NUMBER			SPOUSE SOCIAL SECURITY NUMBER		
FIRST N	AME	MI	LAST NAME		
SPOUSE	FIRST NAME	MI	SPOUSE LAST NAME		
CURREN	NT ADDRESS		CITY	STATE	ZIP CODE
DAYTIME PHONE NUMBER			EVENING PHONE NUMBER		
IAM	NOT REPORTING TAXABLE INCO	ME FOR 2	016 BECAUSE:		
1	I had <b>NO TAXABLE INCOME</b> for the Federal Form 1040, if filed, or list sou	•		•	
2	I was a member of the <b>ARMED FORCES</b> , including the National Guard, of the United States for all of 2016, and had no other taxable income. (This does not include civilians employed by the military).				
3	I was <b>UNDER THE AGE OF 18</b> for all of (Attach copy of Birth Certificate or D			Date of Birth	
4	I am a <b>RETIRED</b> individual receiving only pension, social security, interest, dividends,				
	or other non-taxable income for all of	of 2016		.Date Retired	
	(Attach a copy of page 1 of your 2016 Federal Form 1040 if filed).				
5	Prior to January 1, 2016, I moved fro (Indicate previous address below) Previous Address			Date of Move	
6	Taxpayer is deceased			Date of Death_	
7	I am filing a 2016 Tiffin return jointly with my spouse				
			Spouse's Name		Spouse's SSN
Signatu	re Date	2	Spouse's Signature		Date

THE ABOVE SIGNED DECLARES UNDER PENALTY OF PERJURY THAT THIS RETURN IS TRUE, CORRECT AND COMPLETE FOR TAX YEAR 2016.